

PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY

I HEREBY DECLARE THAT:

My residence, post office address, and citizenship are as stated next to my name in PART A on page 2 hereof.

I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHOD OF TREATMENT OF INFECTED TISSUES

the specification of which:

- ☐ is attached hereto.
- ☒ was filed on March 27, 1992 as Attorney Docket No. 5325-0122.
- ☐ was filed on _____ as Application Serial No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Sec. 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, Sec. 119 of any foreign application(s) for patent or inventor's certificate listed in PART B on page 2 hereof and have also identified in PART B on page 2 hereof any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

I hereby claim the benefit under Title 35, United States Code, Sec. 120 of any United States application(s) listed in PART C on page 2 hereof and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Sec. 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Sec. 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

I hereby declare that all statements made herein of my knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the lie so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the following as my attorney or agent with full power of substitution to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith:

Peter J. Dehlinger	Reg. No. 28,006
Gary R. Fabian	Reg. No. 33,875
Carol A. Stratford	Reg. No. 34,444

whose mailing address for this application is: LAW OFFICES OF PETER J. DEHLINGER
P.O. Box 60850
Palo Alto, CA 94306
TELEPHONE: (415) 324-0880

See Page 2 attached, signed, and made a part hereof.

PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY

PART A: Inventor Information And Signature

Full name of SOLE or FIRST inventor Martin C. Woodle

Citizenship U.S.A. Post Office Address 445 Oak Grove Avenue, #3
Menlo Park, California 94025

Residence (if Different) (same)

Inventor's signature: Martin Woodle Date: May 18, 1992

Full name of SECOND joint inventor, if any Irma A.J.M. Bakker-Woudenberg

Citizenship Dutch. Post Office Address Bergmolen 7, 2661 Bergschenhoek
The Netherlands

Residence (if different) (same)

Second Inventor's signature: _____ Date: _____

Full name of THIRD joint inventor, if any Francis J. Martin

Citizenship U.S.A. Post Office Address 415 West Portal Avenue
San Francisco, California 94217

Residence (if different) _____

Third Inventor's signature: Francis J. Martin Date: May 14, 1992

PART B; Prior Foreign Application(s)

Serial No.	Country	Day/Month/Year Filed	Priority	Claimed
			<input type="checkbox"/> Yes	<input type="checkbox"/> No
			<input type="checkbox"/> Yes	<input type="checkbox"/> No

PART C: Claim For Benefit of Filing Date Of Earlier U.S. Applications(s)

Serial No.	Filing Date	Status:		
642,231	01/15/91	<input type="checkbox"/> Patented	<input checked="" type="checkbox"/> Pending	<input type="checkbox"/> Abandoned
425,224	10/20/89	<input checked="" type="checkbox"/> Patented	<input type="checkbox"/> Pending	<input type="checkbox"/> Abandoned

See Page 1 to which this is attached and from which this Page 2 continues.

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PATENT APPLICATION DECLARATION AND POWER OF ATTORNEY

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Full name of SOLE or FIRST inventor Martin C. Woodle
 Citizenship U.S.A. Post Office Address 445 Oak Grove Avenue, #3
Menlo Park, California 94025
 Residence (if Different) (same)
 Inventor's signature: _____ Date: _____

Full name of SECOND joint inventor, if any Irma A.J.M. Bakker-Woudenberg
 Citizenship Dutch. Post Office Address Bergmolen 7, 2661 Bergschenhoek
The Netherlands

Residence (if different) (same)
 Second Inventor's signature: *W. Bakker* Date: July 30 1992

Full name of THIRD joint inventor, if any Francis J. Martin
 Citizenship U.S.A. Post Office Address 415 West Portal Avenue
San Francisco, California 94217

Residence (if different) _____
 Third Inventor's signature: *Francis J. Martin* Date: May 14, 1992

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See Page 1 to which this is attached and from which this Page 2 continues.

Attorney Docket No.: 5325-0126
Applicant: Liposome Technology, Inc.
Serial No.: 07/858,171
Filing Date: March 27, 1992
For: METHOD OF TREATMENT OF INFECTED TISSUES

COPY

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9 (f) and 1.27 (c)) - SMALL BUSINESS CONCERN

I hereby declare that I am:

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF
CONCERN Liposome Technology, Inc.

ADDRESS OF
CONCERN 1050 Hamilton Court
Menlo Park, California 94025

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9 (d), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees, including those of its affiliates, does not exceed 500 persons and the concern has not assigned, granted, conveyed, or licensed, and is under no obligation under contract or law to assign, grant, convey, or licenses, any rights in the invention to any person who could not be classified as an independent inventor if that person had made the invention, or to any concern which would not qualify as a small business concern or a nonprofit organization under this section. For the purpose of this section concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both. The number of employees of the business concern is the average over the fiscal year of the persons employed during each of the pay periods of the fiscal year. Employees are those persons employed on a full-time, part-time or temporary basis during the previous fiscal year of the concern.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled METHOD OF TREATMENT OF INFECTED TISSUES by inventors(s) Martin C. Woodle, Irma A.J.M. Bakker-Woudenberg, and Francis J. Martin described in

- ☐ the specification filed herewith
☒ Application Serial No. 07/858,171, filed March 27, 1992.
☐ Patent No. _____, issued _____.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9 (d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9 (d) or a nonprofit organization under 37 CFR 1.9 (e).

* NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME: _____

ADDRESS: _____
☐ individual ☐ small business concern ☐ nonprofit organization

NAME: _____

ADDRESS: _____
☐ individual ☐ small business concern ☐ nonprofit organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 CFR 1.28(b))

- 2 -

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such wilful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME [please type or print]
OF PERSON SIGNING

FRANCIS J. MARTIN

TITLE OF PERSON OTHER THAN
OWNER

VICE PRESIDENT, RESEARCH

ADDRESS OF PERSON
SIGNING

1050 Hamilton Court, Menlo Park CA 94025

SIGNATURE:

Francis J. Martin

DATE:

May 14, 1992

064230-8506E160